

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Nationwide Mutual Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Dennis Ross

Mailing Address 133 South Harbor Drive

City Venice State FL Zip Code 34285

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Dennis A. Ross

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 15

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2013

Transaction ID : 438DC9CF2375345A714

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Iowans for Latham

Mailing Address PO Box 8237

City Des Moines State IA Zip Code 50301-8237

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Thomas Latham

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2013

Transaction ID : AFC731B2DD041A6E843

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jim Tracy for Congress

Mailing Address PO Box 332490

City Murfreesboro State TN Zip Code 37133

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Jim Tracy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 04

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2013

Transaction ID : BFE830C684B8C272D68

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

TOTAL This Period (last page this line number only)..... ▶